

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **Fin-tube Heat Exchanger with Vortex Generator**

the specification of which (check one)

is attached hereto.

was filed on _____ as Application Serial No. _____
and with amendments through _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by the amendment referred to above (if any).

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of the following foreign application listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

**EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED WITHIN 12 MONTHS PRIOR TO
THIS APPLICATION**

Prior Foreign Application:

<u>Country</u>	<u>Appl. No.</u>	<u>Filing Date</u>	<u>Priority Claimed</u>
_____	_____	_____	<u>Yes/No</u>

**ALL FOREIGN APPLICATIONS, IF ANY, FILED MORE THAN 12 MONTHS PRIOR TO THIS
APPLICATION**

POWER OF ATTORNEY: As the named inventor, I hereby appoint the following attorney(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

MORTON J. ROSENBERG, ESQ., Reg. 26,049; DAVID I. KLEIN, ESQ., Reg. 33,253 & JUN Y. LEE, ESQ., Reg. 40,262

Address all telephone calls to MORTON J. ROSENBERG at telephone number 410-465-6678

Address all correspondence to ROSENBERG, KLEIN & LEE

3458 ELLICOTT CENTER DRIVE-SUITE 101

ELLICOTT CITY, MD 21043

FAX # : 410-461-3067

E-MAIL ADDRESS: rkl@rklpatlaw.com

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of inventor	Min-Sheng Liu (Liu is Family Name)
Inventor's signature	<i>Min-Sheng Liu</i>
Date	12/06/2000
Residence	No. 195-6, Sec. 4, Chung Hsing Rd., Chutung Town, Hsinchu Hsian, Taiwan 310, R.O.C.
Citizenship	Taiwan, R.O.C.
Post Office Address	No. 195-6, Sec. 4, Chung Hsing Rd., Chutung Town, Hsinchu Hsian, Taiwan 310, R.O.C.

Full name of inventor	Chi-Chung Wang (Wang is Family Name)
Inventor's signature	<i>Chi-Chung Wang</i>
Date	12/06/2000
Residence	No. 195-6, Sec. 4, Chung Hsing Rd., Chutung Town, Hsinchu Hsian, Taiwan 310, R.O.C.
Citizenship	Taiwan, R.O.C.
Post Office Address	No. 195-6, Sec. 4, Chung Hsing Rd., Chutung Town, Hsinchu Hsian, Taiwan 310, R.O.C.

Full name of inventor	Jane-Sunn Liaw (Liaw is Family Name)
Inventor's signature	<i>Jane - Sunn Liaw</i>
Date	12/06/2000
Residence	No. 195-6, Sec. 4, Chung Hsing Rd., Chutung Town, Hsinchu Hsian, Taiwan 310, R.O.C.
Citizenship	Taiwan, R.O.C.
Post Office Address	No. 195-6, Sec. 4, Chung Hsing Rd., Chutung Town, Hsinchu Hsian, Taiwan 310, R.O.C.

Full name of inventor	Yu-Juei Chang (Chang is Family Name)
Inventor's signature	<i>Yu-Juei Chang</i>
Date	Dec. 7. 2000
Residence	No. 195-6, Sec. 4, Chung Hsing Rd., Chutung Town, Hsinchu Hsian, Taiwan 310, R.O.C.
Citizenship	Taiwan, R.O.C.
Post Office Address	No. 195-6, Sec. 4, Chung Hsing Rd., Chutung Town, Hsinchu Hsian, Taiwan 310, R.O.C.